

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

1. County of Pima

District of _____

Town of _____

or _____

City of _____

BUREAU OF VITAL STATISTICS
ORIGINAL CERTIFICATE OF BIRTHState Index No. 131County Registrar No. 397

Local Registrar No. _____

2. Full name of child Sophia Acosta

(If birth occurred in a hospital or institution, give its NAME instead of street and number)

If child is not yet named, make supplemental report, as directed.

3. Sex of Child FemaleTo be answered ONLY
in event of plural
births.

4. Twin, triplet or other _____

6. Legitimate? Yes7. Date of birth Dec 4 1925

Month day year

5. No., in order of birth _____

8. FATHER

Full name José M Acosta

9. Residence

(Usual place of abode) 136 Mexico Ave

If nonresident, give place and state

14. MOTHER

Full maiden name Laura Sanchez

15. Residence

(Usual place of abode) Mamie Ave

If nonresident, give place and state

10. Color or race Mex11. Age at last birthday 32 (Years)16. Color or race Mex17. Age at last birthday 25 (Years)

12. Birthplace (city or place)

(State or country) Mexico

18. Birthplace (city or place)

(State or country) Mexico

13. Occupation

Nature of industry Laborn

19. Occupation

Nature of industry Housewife

20. Number of children of this mother

(a) Born alive and now living 7(b) Born alive but now dead 1

(c) Stillborn _____

21. Were precautions taken against
thallia neonatorum? Yes(Taken as of time of birth of child herein
certified and including this child.)

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was

(Born alive or stillborn) born aliveat 11:55 PM on the date above stated.*When there was no attending physician or
midwife, then the father, householder, etc.,
should make this return. A stillborn child
is one that neither breathes nor shows other
evidences of life after birth.Given name added from
a supplemental report

Month, day, year.

Signature William D BraxtonAddress Mamie AveFiled Dec 1219 25

Local Registrar.

Registrar.

Filed _____

19 _____

County Registrar.

211-1204-329

N. B.—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each in order of birth stated.